PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number 10/009313

| CLAIMS AS FILED - PART I | | | | | | SMALL ENTI | | | YTITY | | OTHER | THAN |
|--|--|---|-----------------|-------------------------------|----------------------|------------------|---|---------------------|------------------------|----|---|------------------------|
| | | | (Column 1) | | (Column 2) | | | TYPE [| | OR | SMALL ENTITY | |
| TOTAL CLAIMS | | | | | Ç. | | | RATE | FEE |] | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMB | NUMBER EXTRA | | BASIC FEE | 445 | OR | BASIC FEE | |
| TOTAL CHARGEABLE CLAIMS | | | 14 minus 20= | | * | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | ے minus 3 = | | * | | | X42= | | OR | X84= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +140= | | OR | +280= | |
| * If the difference in column 1 is less than zero, enter "0" | | | | | r "0" in c | olumn 2 | | TOTAL | 445 | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL | ENTITY | OR | OTHER SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * 4 | Minus | ** (| 20 | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * 2 | Minus | *** | <u>3</u> | = / | | X42= | | OR | X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +140= | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT. FEE | / | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colu | mn 2) | (Column 3) | , | 10011.1 221 | | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| AMENDMENT B | *** **** *** *** *** *** *** *** *** * | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | IEST BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | | X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | |
| | | | | | | • | L | +140= | | OR | +280= | |
| | , | | • | | | | A | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colur | | (Column 3) | - | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | CLAIM | = | | X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +140= | | ΩB | +280= | |
| | | mn 1 is less than th | | | | | L | TOTAL | | OR | TOTAL | |
| *** | If the "Highest Nu | mber Previously Pa mber Previously Pa | aid For" IN THI | S SPACE i | s less that | n 3, enter "3." | | DDIT. FEE | | | ADDIT. FEE | |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |